



Family Advocates, Inc.

24 Hour Help Line: 1 (800) 924-2624

Grant County Office/Shelter
305 Eastside Road
P.O. Box 705
Platteville, WI 53818

608.348.5995

director@familyadv.org

Lafayette County Office
By Appointment

608.482.0582

lafayetteco@familyadv.org

Iowa County Office
305 North Iowa Street
Dodgenville, WI 53533

608.778.8714

victimadv@familyadv.org

VOLUNTEER WAIVER

Thank you for volunteering to help with Family Advocates. Please read, complete, and sign the following form.

VOLUNTEER INFORMATION (PLEASE PRINT CLEARLY)

Name: _____

Address: _____

Phone or email: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship to Volunteer: _____ Phone: _____

VOLUNTEER AGREEMENT

As a volunteer, I release and hold harmless Family Advocates, Inc. and their successors from any and all claims, costs, suits, actions, judgments or expenses upon any damage, loss or injury to me or to my property which may arise from this volunteer event.

I acknowledge that I am fully aware of any and all risks posed by these volunteer activities and that I have no medical condition that prevents me from engaging in them.

I also give permission to be photographed by project partners or the media for use in printed materials, through the internet or through other media outlets.

In signing below, I acknowledge that I have read and understand this volunteer agreement.

Signature: _____

NOTE: If the volunteer is under the age of 18, a parent or legal guardian must sign.

Parent Signature: _____